

HAND DELIVERED

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A

Page 1 of 9

For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER

Barbara Lee

(202) 225-2661

2011 MAY 13 PM 3:21

(Full Name)

(Daytime Telephone)

U.S.

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Member of the U.S.
House of Representatives

State: CA
District: 9

Officer Or
Employee

Employing Office:

Report
Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.

PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI.	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII.	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III.	Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX.	Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
K.	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Barbara Lee

Page 2 of 9

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source	Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any other business or investment in a personal residence or</p>	<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
Book contract with Rowman & Littlefield Publishers, Inc. (Approved by Committee)	Indefinite	Royalties on sales	\$1,001 - \$2,500	
Charles Schwab Money Market Account	\$1 - \$1,000	INTEREST	\$1 - \$200	
Delaware SMID Cap Growth Class C Fund (held in Fidelity SEP IRA)	\$1 - \$1,000	None	NONE	PS(part)
Delaware Trend Fund (held in Fidelity SEP IRA)	None	None	NONE	S
East West Bank Accounts, Oakland, CA	\$250,001 - \$500,000	INTEREST	\$1 - \$200	
Fidelity Freedom 2020 Fund (held in Fidelity SEP IRA)	\$1,001 - \$15,000	CAPITAL GAINS	\$1 - \$200	PS(part)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Barbara Lee

Page 3 of 9

Mass. Investors Growth Fund (held in Fidelity SEP IRA)	\$1 - \$1,000	CAPITAL GAINS	\$1 - \$200	S(part)
Oakland, CA Residential Property (portion rented out)	None	RENT/CAPITAL GAINS	\$100,001 - \$1,000,000	S
Savings Plus Socially Responsible Fund (held in State of CA Savings Plus Deferred Compensation Program)	None	CAPITAL GAINS	\$201 - \$1,000	S
SPP Int'l Mg Fund (held in State of CA Savings Plus Deferred Compensation Program)	None	None	NONE	S
SPP Mid Cap Mg Fund-Growth (held in State of CA Savings Plus Deferred Compensation Program)	None	CAPITAL GAINS	\$1 - \$200	S
Vanguard Total Bond Market Index Fund (held in State of CA Savings Plus Deferred Compensation Program)	None	CAPITAL GAINS	\$1 - \$200	S
Wells Fargo Bank Checking Account, Sun City, AZ (held jointly with mother)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

SCHEDULE IV - TRANSACTIONS

Name Barbara Lee

Page 4 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Delaware SMID Cap Growth Class C Fund (held in Fidelity SEP IRA)	S(part)	No	10-15-10	Less than \$1,000
	Delaware SMID Cap Growth Class C Fund (held in Fidelity SEP IRA)	P	N/A	10-8-10	Less than \$1,000
	Delaware Trend Fund (held in Fidelity SEP IRA)	S	No	9-3-10	\$1,001 - \$15,000
	Fidelity Freedom 2020 Fund (held in Fidelity SEP IRA)	S(part)	No	9-1-10 and 10-13-10	\$15,001 - \$50,000
	Fidelity Freedom 2020 Fund (held in Fidelity SEP IRA)	P	N/A	5-10-10 and 12-14-10	\$15,001 - \$50,000
	Mass Investors Growth Fund (held in Fidelity SEP IRA)	S(part)	Yes	9-3-10 and 10-15-10	\$1,001 - \$15,000
	Oakland, CA Residential Property (portion rented out)	S	Yes	11-24-10	\$1,000,001 - \$5,000,000
	Savings Plus Socially Responsible Fund (held in State of CA Savings Plus Deferred Compensation Program)	S	Yes	4-29-10	\$1,001 - \$15,000
	SPP Int'l Mg Fund (held in State of CA Savings Plus Deferred Compensation Program)	S	No	4-29-10	\$1,001 - \$15,000
	SPP Mid Cap Mg Fund - Growth (Held in State of CA Savings Plus Deferred Compensation Program)	S	No	4-29-10	\$1,001 - \$15,000

SCHEDULE IV - TRANSACTIONS

Name Barbara Lee

Page 5 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Vanguard Total Bond Market Index Fund (held in State of CA Savings Plus Deferred Compensation Program)	S	No	4-29-10	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Barbara Lee

Page 6 of 9

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Wright-Patman Congressional Federal Credit Union, Washington DC	August 2009	Personal Loan PAID OFF IN 2010	\$15,001 - \$50,000
	Wachovia		Mortgage on Oakland residential property (portion of home rented out) PAID OFF IN 2010	\$1,000,001 - \$5,000,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name **Barbara Lee**

Page 7 of 9

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
MAACP (Workshop panelist)	Jul. 10-11	Phoenix, AZ-Kansas City, MO- DC	Y	Y	Y	None

SCHEDULE VII - POSITIONS

Name Barbara Lee

Page 8 of 9

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	WILLWAND (Nonprofit Public Benefit Corporation)
Board Member	Project Vote Smart (Nonprofit Public Benefit Corporation)
Trustee	Ghana Children's Fund (Nonprofit Public Benefit Corporation, a Project of the East Bay Community Foundation)
Advisory Board Member	American Progressive Caucus Foundation (Nonprofit Public Benefit Foundation)
Ex Officio Board Member	Congressional Black Caucus Foundation, Inc. (Nonprofit Public Benefit Foundation) - No longer a Member effective February 2010
Honorary Chair, Advisory Board	Hip Hop Caucus (Nonprofit Public Benefit Foundation)
Honorary Member, Advisory Council	The Global AIDS Alliance (Nonprofit Public Benefit Corporation - No longer a Member effective February, 2010)

SCHEDULE IX - AGREEMENTS

Name Barbara Lee

Page 9 of 9

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1990-1998	State of California	Deferred Compensation Program administered by the State of California pursuant to IRC section 457. All interests disposed of in 2010.